



STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM



NOTE: THIS FORM IS **ONLY** TO BE USED FOR THE
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

☐ Lease

☐ Purchase

☐ Donation

X Other

Explain: Trust transfer for in-stream flow benefit and to mitigate
new out-of-stream uses

☐ Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE:

END DATE:

FOR OFFICE USE ONLY OKAND6AN
FILE No. C64-01203C WRIA 52
DATE ACCEPTED 12/04/2013 BY [Signature]
FEE \$ 0 REC'D 10/30/2013
CHECK No. 0
SEPA: ☐ Exempt ☐ Not exempt

****IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)****

1. Applicant Information:

APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.
Kyle Mathison		()
ADDRESS		
4597 Stemilt Hill Rd		
CITY	STATE	ZIP CODE
Wenatchee	WA	98801

CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.
Marc Marquis, Peterson & Marquis Law Office	(509) 679-0337	()
ADDRESS		
1227 First Street		
CITY	STATE	ZIP CODE
Wenatchee	WA	98801

2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)
G4-01203C	Ralph Hart
DO YOU OWN THE RIGHT? X YES <input type="checkbox"/> NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES <input type="checkbox"/> NO	
ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGHT METERED OR MEASURED? <input type="checkbox"/> YES X NO	
IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF WATER USE FOR EACH OF THE LAST FIVE YEARS	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

<u>64-01203CWR15</u>	FOR OFFICE USE ONLY	APP 12074 PR 64-01203 COR 64-01203C
WATER RIGHT NO. _____	FILE (contract) NO. _____	
<u>C64-01203C</u>		

3. How is Water to be Made Available for Trust?

<input type="checkbox"/> Alteration in method of diversion	<input type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input checked="" type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input type="checkbox"/> Other, Explain below:
Name of funding source(s): NA	

WATER RIGHT DESCRIPTION *

4. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Well		S1/2	NW	33	36N	30E		

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OKAN

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

5. Purpose of Use:

A. Existing Use of the Water Right

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation 150ac	800gpm	640af	April 15 to October 15

B. Proposed Purpose of the Trust Water Right:

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR
Transfer for in-stream benefit and mitigation for new downstream uses	640af

6. Place of Use:

A. Existing:

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
Portions of Gov. Lots 1, 4, 5, 9, 10, 11, 12 of Sec. 33 and Gov. Lots 7 and 9 of Sec. 34, Lying northerly and easterly of the highway and all being within T36N, R30EWM							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		33,34	36N	30E	Okanogan	3630330016	150ac
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IF NO, PROVIDE OWNER(S) NAME:							

* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.

6. Place of Use (continued)

B. Proposed:

IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED
Aeneas Creek which is tributary to West Fork of San Poil River which is a tributary of Columbia River.

7. Remarks and Other Relevant Information:

This trust transfer is intended to serve as a component of a mitigated transfer for instream benefit and to mitigate for new downstream uses

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

8. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

Steve S. L. L. L. Kyle D. Matheson 10 / 24 / 2013
(Applicant) (Date)

Steve S. L. L. L. Kyle D. Matheson 10 / 24 / 2013
(Water Right Holder) (Date)

Steve S. L. L. L. Kyle D. Matheson 10 / 24 / 2013
(Land Owner(s) of Existing Place of Use) (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

- ☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION _____ IS INCOMPLETE
☐ OTHER/EXPLANATION: _____

STAFF: _____ DATE: ____ / ____ / ____